

STATE OF NORTH CAROLINA Forsyth County		File No. <div style="font-size: 1.2em; font-weight: bold;">17 CVS 4738</div> In The General Court Of Justice <input type="checkbox"/> District <input type="checkbox"/> Superior Court Division																
Name Of Plaintiff Rebecca Kovalich Address 106 Charleston Blvd. City, State, Zip Isle of Palms, SC 29451		CIVIL SUMMONS <input type="checkbox"/> ALIAS AND PLURIES SUMMONS (ASSESS FEE)																
VERSUS		G.S. 1A-1, Rules 3 and 4																
Name Of Defendant(s) Preferred Pain Management & Spine Care, P.A., Dr. David Spivey and Sherry Spivey		Date Original Summons Issued Date(s) Subsequent Summons(es) Issued																
To Each Of The Defendant(s) Named Below:																		
Name And Address Of Defendant 1 Preferred Pain Management & Spine Care, P.A. 2912 Maplewood Avenue Winston-Salem, NC 27103		Name And Address Of Defendant 2 Dr. David Spivey 1902 Curraghmore Road Clemmons, NC 27012																
A Civil Action Has Been Commenced Against You! You are notified to appear and answer the complaint of the plaintiff as follows:																		
1. Serve a copy of your written answer to the complaint upon the plaintiff or plaintiff's attorney within thirty (30) days after you have been served. You may serve your answer by delivering a copy to the plaintiff or by mailing it to the plaintiff's last known address, and 2. File the original of the written answer with the Clerk of Superior Court of the county named above.																		
If you fail to answer the complaint, the plaintiff will apply to the Court for the relief demanded in the complaint.																		
Name And Address Of Plaintiff's Attorney (if none, Address Of Plaintiff) Sean F. Herrmann Van Kampen Law, PC 315 E. Worthington Avenue Charlotte, NC 28203		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Date Issued</td> <td style="width: 30%;">Time</td> <td style="width: 40%;"></td> </tr> <tr> <td style="text-align: center;">8-1-17</td> <td style="text-align: center;">8:31</td> <td style="text-align: center;"><input checked="" type="checkbox"/> AM <input type="checkbox"/> PM</td> </tr> <tr> <td colspan="3">Signature</td> </tr> <tr> <td colspan="3" style="text-align: center;"> </td> </tr> <tr> <td colspan="3"> <input checked="" type="checkbox"/> Deputy CSC <input type="checkbox"/> Assistant CSC <input type="checkbox"/> Clerk Of Superior Court </td> </tr> </table>		Date Issued	Time		8-1-17	8:31	<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	Signature						<input checked="" type="checkbox"/> Deputy CSC <input type="checkbox"/> Assistant CSC <input type="checkbox"/> Clerk Of Superior Court		
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NOTE TO PARTIES: Many counties have MANDATORY ARBITRATION programs in which most cases where the amount in controversy is \$25,000 or less are heard by an arbitrator before a trial. The parties will be notified if this case is assigned for mandatory arbitration, and, if so, what procedure is to be followed.																		
(Over)																		
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EXHIBIT
A

RETURN OF SERVICE		
I certify that this Summons and a copy of the complaint were received and served as follows:		
DEFENDANT 1		
<i>Date Served</i>	<i>Time Served</i> <input type="checkbox"/> AM <input type="checkbox"/> PM	<i>Name Of Defendant</i>
<input type="checkbox"/> By delivering to the defendant named above a copy of the summons and complaint. <input type="checkbox"/> By leaving a copy of the summons and complaint at the dwelling house or usual place of abode of the defendant named above with a person of suitable age and discretion then residing therein. <input type="checkbox"/> As the defendant is a corporation, service was effected by delivering a copy of the summons and complaint to the person named below. <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>		
<input type="checkbox"/> Other manner of service (specify)		
<input type="checkbox"/> Defendant WAS NOT served for the following reason:		
DEFENDANT 2		
<i>Date Served</i>	<i>Time Served</i> <input type="checkbox"/> AM <input type="checkbox"/> PM	<i>Name Of Defendant</i>
<input type="checkbox"/> By delivering to the defendant named above a copy of the summons and complaint. <input type="checkbox"/> By leaving a copy of the summons and complaint at the dwelling house or usual place of abode of the defendant named above with a person of suitable age and discretion then residing therein. <input type="checkbox"/> As the defendant is a corporation, service was effected by delivering a copy of the summons and complaint to the person named below. <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>		
<input type="checkbox"/> Other manner of service (specify)		
<input type="checkbox"/> Defendant WAS NOT served for the following reason:		
<i>Service Fee Paid</i> \$	<i>Signature Of Deputy Sheriff Making Return</i>	
<i>Date Received</i>	<i>Name Of Sheriff (type or print)</i>	
<i>Date Of Return</i>	<i>County Of Sheriff</i>	
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STATE OF NORTH CAROLINA _____ Forsyth _____ County		File No. 17 CVS 4738 In The General Court Of Justice <input type="checkbox"/> District <input type="checkbox"/> Superior Court Division
Name Of Plaintiff Rebecca Kovalich		CIVIL SUMMONS <input type="checkbox"/> ALIAS AND PLURIES SUMMONS (ASSESS FEE) G.S. 1A-1, Rules 3 and 4
Address 106 Charleston Blvd.		
City, State, Zip Isle of Palms, SC 29451		
VERSUS		
Name Of Defendant(s) Preferred Pain Management & Spine Care, P.A., Dr. David Spivey and Sherry Spivey		Date Original Summons Issued _____ Date(s) Subsequent Summons(es) Issued _____
To Each Of The Defendant(s) Named Below:		
Name And Address Of Defendant 1 Sherry Spivey 1902 Curraghmore Road Clemmons, NC 27012		Name And Address Of Defendant 2
A Civil Action Has Been Commenced Against You! You are notified to appear and answer the complaint of the plaintiff as follows: 1. Serve a copy of your written answer to the complaint upon the plaintiff or plaintiff's attorney within thirty (30) days after you have been served. You may serve your answer by delivering a copy to the plaintiff or by mailing it to the plaintiff's last known address, and 2. File the original of the written answer with the Clerk of Superior Court of the county named above. If you fail to answer the complaint, the plaintiff will apply to the Court for the relief demanded in the complaint.		
Name And Address Of Plaintiff's Attorney (if none, Address Of Plaintiff) Sean F. Herrmann Van Kampen Law, PC 315 E. Worthington Avenue Charlotte, NC 28203		Date Issued 8-1-17 Time 8:31 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM Signature <i>Nicole Gatto</i> <input checked="" type="checkbox"/> Deputy CSC <input type="checkbox"/> Assistant CSC <input type="checkbox"/> Clerk Of Superior Court

<input type="checkbox"/> ENDORSEMENT (ASSESS FEE) This Summons was originally issued on the date indicated above and returned not served. At the request of the plaintiff, the time within which this Summons must be served is extended sixty (60) days.	Date Of Endorsement _____	Time _____ <input type="checkbox"/> AM <input type="checkbox"/> PM
	Signature _____	
	<input type="checkbox"/> Deputy CSC <input type="checkbox"/> Assistant CSC <input type="checkbox"/> Clerk Of Superior Court	

NOTE TO PARTIES: Many counties have **MANDATORY ARBITRATION** programs in which most cases where the amount in controversy is \$25,000 or less are heard by an arbitrator before a trial. The parties will be notified if this case is assigned for mandatory arbitration, and, if so, what procedure is to be followed.

(Over)

RETURN OF SERVICE			
I certify that this Summons and a copy of the complaint were received and served as follows:			
DEFENDANT 1			
Date Served	Time Served	<input type="checkbox"/> AM <input type="checkbox"/> PM	Name Of Defendant
<input type="checkbox"/> By delivering to the defendant named above a copy of the summons and complaint.			
<input type="checkbox"/> By leaving a copy of the summons and complaint at the dwelling house or usual place of abode of the defendant named above with a person of suitable age and discretion then residing therein.			
<input type="checkbox"/> As the defendant is a corporation, service was effected by delivering a copy of the summons and complaint to the person named below.			
<small>Name And Address Of Person With Whom Copies Left (if corporation, give title of person copies left with)</small>			
<input type="checkbox"/> Other manner of service (specify)			
<input type="checkbox"/> Defendant WAS NOT served for the following reason:			
DEFENDANT 2			
Date Served	Time Served	<input type="checkbox"/> AM <input type="checkbox"/> PM	Name Of Defendant
<input type="checkbox"/> By delivering to the defendant named above a copy of the summons and complaint.			
<input type="checkbox"/> By leaving a copy of the summons and complaint at the dwelling house or usual place of abode of the defendant named above with a person of suitable age and discretion then residing therein.			
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<small>Name And Address Of Person With Whom Copies Left (if corporation, give title of person copies left with)</small>			
<input type="checkbox"/> Other manner of service (specify)			
<input type="checkbox"/> Defendant WAS NOT served for the following reason:			
Service Fee Paid		Signature Of Deputy Sheriff Making Return	
\$			
Date Received		Name Of Sheriff (type or print)	
Date Of Return		County Of Sheriff	
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STATE OF NORTH CAROLINA

Forsyth County

File No.

17 CVS 4738

In The General Court Of Justice

☐ District ☐ Superior Court Division

Name Of Plaintiff

Suzanne Nagelski

Address

15109 Chilgrove Lane

City, State, Zip

Huntersville, NC 28078

VERSUS

Name Of Defendant(s)

Preferred Pain Management & Spine Care, P.A., Dr. David Spivey
and Sherry Spivey

CIVIL SUMMONS

☐ ALIAS AND PLURIES SUMMONS (ASSESS FEE)

G.S. 1A-1, Rules 3 and 4

Date Original Summons Issued

Date(s) Subsequent Summons(es) Issued

To Each Of The Defendant(s) Named Below:

Name And Address Of Defendant 1

Sherry Spivey
1902 Curraghmore Road
Clemmons, NC 27012

Name And Address Of Defendant 2

A Civil Action Has Been Commenced Against You!

You are notified to appear and answer the complaint of the plaintiff as follows:

1. Serve a copy of your written answer to the complaint upon the plaintiff or plaintiff's attorney within thirty (30) days after you have been served. You may serve your answer by delivering a copy to the plaintiff or by mailing it to the plaintiff's last known address, and
2. File the original of the written answer with the Clerk of Superior Court of the county named above.

If you fail to answer the complaint, the plaintiff will apply to the Court for the relief demanded in the complaint.

Name And Address Of Plaintiff's Attorney (if none, Address Of Plaintiff)

Sean F. Herrmann
Van Kampen Law, PC
315 E. Worthington Avenue
Charlotte, NC 28203

Date Issued

8-1-17

Time

8:31

☒ AM ☐ PM

Signature

Nicole Gatto

☒ Deputy CSC ☐ Assistant CSC ☐ Clerk Of Superior Court☐ ENDORSEMENT (ASSESS FEE)

This Summons was originally issued on the date indicated above and returned not served. At the request of the plaintiff, the time within which this Summons must be served is extended sixty (60) days.

Date Of Endorsement

Time

☐ AM ☐ PM

Signature

☐ Deputy CSC ☐ Assistant CSC ☐ Clerk Of Superior Court

NOTE TO PARTIES: Many counties have MANDATORY ARBITRATION programs in which most cases where the amount in controversy is \$25,000 or less are heard by an arbitrator before a trial. The parties will be notified if this case is assigned for mandatory arbitration, and, if so, what procedure is to be followed.

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RETURN OF SERVICE		
I certify that this Summons and a copy of the complaint were received and served as follows:		
DEFENDANT 1		
<i>Date Served</i>	<i>Time Served</i> <input type="checkbox"/> AM <input type="checkbox"/> PM	<i>Name Of Defendant</i>
<input type="checkbox"/> By delivering to the defendant named above a copy of the summons and complaint. <input type="checkbox"/> By leaving a copy of the summons and complaint at the dwelling house or usual place of abode of the defendant named above with a person of suitable age and discretion then residing therein. <input type="checkbox"/> As the defendant is a corporation, service was effected by delivering a copy of the summons and complaint to the person named below.		
<div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div> <i>Name And Address Of Person With Whom Copies Left (if corporation, give title of person copies left with)</i>		
<input type="checkbox"/> Other manner of service (specify)		
<input type="checkbox"/> Defendant WAS NOT served for the following reason:		
DEFENDANT 2		
<i>Date Served</i>	<i>Time Served</i> <input type="checkbox"/> AM <input type="checkbox"/> PM	<i>Name Of Defendant</i>
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STATE OF NORTH CAROLINA

File No.

17 CVS 4738

Forsyth County

In The General Court Of Justice

☐ District ☐ Superior Court Division

Name Of Plaintiff

Suzanne Nagelski

Address

15109 Chilgrove Lane

City, State, Zip

Huntersville, NC 28078

VERSUS

CIVIL SUMMONS

☐ ALIAS AND PLURIES SUMMONS (ASSESS FEE)

G.S. 1A-1, Rules 3 and 4

Name Of Defendant(s)

Preferred Pain Management & Spine Care, P.A., Dr. David Spivey
and Sherry Spivey

Date Original Summons Issued

Date(s) Subsequent Summons(es) Issued

To Each Of The Defendant(s) Named Below:

Name And Address Of Defendant 1

Preferred Pain Management & Spine Care, P.A.
2912 Maplewood Avenue
Winston-Salem, NC 27103

Name And Address Of Defendant 2

Dr. David Spivey
1902 Curraghmore Road
Clemmons, NC 27012

A Civil Action Has Been Commenced Against You!

You are notified to appear and answer the complaint of the plaintiff as follows:

1. Serve a copy of your written answer to the complaint upon the plaintiff or plaintiff's attorney within thirty (30) days after you have been served. You may serve your answer by delivering a copy to the plaintiff or by mailing it to the plaintiff's last known address, and
2. File the original of the written answer with the Clerk of Superior Court of the county named above.

If you fail to answer the complaint, the plaintiff will apply to the Court for the relief demanded in the complaint.

Name And Address Of Plaintiff's Attorney (if none, Address Of Plaintiff)

Sean F. Herrmann
Van Kampen Law, PC
315 E. Worthington Avenue
Charlotte, NC 28203

Date Issued

8-1-17

Time

8:31

☒ AM ☐ PM

Signature

Nicole Gatto

☒ Deputy CSC☐ Assistant CSC☐ Clerk Of Superior Court☐ ENDORSEMENT (ASSESS FEE)

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Time

☐ AM ☐ PM

Signature

☐ Deputy CSC☐ Assistant CSC☐ Clerk Of Superior Court

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RETURN OF SERVICE		
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DEFENDANT 1		
Date Served	Time Served <input type="checkbox"/> AM <input type="checkbox"/> PM	Name Of Defendant
<input type="checkbox"/> By delivering to the defendant named above a copy of the summons and complaint. <input type="checkbox"/> By leaving a copy of the summons and complaint at the dwelling house or usual place of abode of the defendant named above with a person of suitable age and discretion then residing therein. <input type="checkbox"/> As the defendant is a corporation, service was effected by delivering a copy of the summons and complaint to the person named below. <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>		
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Date Of Return	County Of Sheriff	
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